

School Based Physical Therapy Services



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Public Schools

Definition of Physical Therapy



- “Physical Therapy” means the use of selected knowledge and skills in planning, organizing and directing programs for the care of individuals whose ability to function is impaired.. KRS 327.010, 1-2

School PT defined by state guidelines



- In the school setting, the PT provides support to teachers, aides, healthcare staff and the student in assessing, program planning, implementing intervention as well as education training and assisting with equipment needs



- The PT also addresses training teachers, aides, RN's and healthcare staff or any other staff involved with the student's care on proper lifting and transferring techniques of physically dependent students

Billable PT services



Assessments

Orthopedic Assessment (ROM and strength as it relates to function, positioning, mobility)

Developmental Function (PDMS-II for preschoolers or GMFM for non preschoolers)

Neuromotor Function (balance and coordination, postural control BOT-2)

Assessments continued



- Mobility Assessment (gait with or without an assistive device, stair mobility, playground mobility School Function assessment)
- Wheelchair Assessment (determine appropriate wheelchair for the student's specific needs, get specific specs/measurements)

Physical Therapy Evaluation Procedure



- PT screening form is filled out by classroom teacher, records observations
- Observe the student in the classroom , during gross motor activities (PE/recess), also with mobility in hallways
- Interview with classroom teacher/PE teacher
- Consent to evaluate is signed by the parent if evaluation is deemed necessary

PT Evaluation Procedure cont



- Assess ROM, Strength, gross motor skills, balance and coordination, gait deviations, use of assistive devices, orthotics, positioning needs in the classroom mobility in classrooms, hallways, outside on uneven surfaces and on playground
- *Assess needs of staff training with transfers and lifting

Factors to consider for physical outcomes/goals



- Head, neck and trunk control
- Movement against gravity
- Shoulder/UE strength
- Hip/LE strength
- Movement patterns and gait

PT Evaluation



- History- list medical difficulties, surgeries or physical anomalies secondary to the student's diagnosis
- Objective data collection

Type of MotorAssessment/Scores

List Physical Strengths

List Physical Difficulties

PT Evaluation cont



- Discuss the student's needs as it affects their ability to participate in the classroom, be mobile on school grounds

Recommendations for PT services are stated as

“may be beneficial for the student” ARC team makes the final decision

PT Evaluation cont



- Goals are taken directly from the state guidelines for core content (2.34 most commonly used)
- Benchmarks are stated as measurable outcomes addressing the student's weaknesses, positioning needs as well as mobility needs

XXXXX is a soon to be six year old attending first grade at Southern Oaks Elementary this fall. She has a diagnosis of Spina Bifida and has a shunt. She has a history of orthopedic problems with her feet and lower extremities. She wore special shoes and braces as an infant. She had heelcord lengthening on the right heelcord in December 2009 followed by serial casting. She has worn HKAFO's at school and at home for independent weight bearing and walking. She walked with a postural control walker last school year. She has progressed to independent ambulation without an assistive device while wearing AFO's. Her teacher states she walks well around school.

She is able to go up and down steps with one hand on the rail, but continues to require an occasional one hand assist to maintain her balance. She climbs on the preschool playground equipment, but is not steady on larger playground equipment. She is able to ride a tricycle with minimal assist. She is also transitioning up from floor independently and assists with transfers in and out of her classroom chair. She is able to stand independently for 3-5 minutes without fatigue.

XXX continues to have difficulties with independent gross motor skills, jumping, running, ball skills, etc. She is not yet able to kick a ball at a target consistently. She is not yet able to jump with two footed take off and landing.

PT Recommendations:

XXX would benefit from direct PT services one time per week for 30 minutes to assist with independent mobility on stairs and on the playground, as well as balance/coordination with gross motor skills.

Goal for 2013-2014:

2.34 XXX will perform physical movement skills independently in a variety of settings, at least 90% of the time, in 4/5 trials, on 4/5 school days.

Benchmarks for 2013-2014:

1. XXX will ascend and descend stairs using step to step pattern with one hand on the rail, 100% of the time, in 4/5 trials, on 2/5 school days.
2. XXX will climb playground equipment independently, including stairs ladders, at least 75% of the time, in 4/5 trials on, 2/5 school days.
3. XXX will stand independently for 5-10 minutes, during gross motor activities, 100% of the time, in 4/5 trials, in 5/5 school days.

EZ MED Monthly PT Notes



04/10/2013	99199 (30min) 8:30am to 9:00am Worked outside on playground today. Resistive UE and LE work with climbing playground equipment. Worked on balance to place one foot up on step with rail. Worked on climbing ladders and steps. Worked on balance to tandem step on edge of retaining wall with min assist. Gait over uneven terrain mulch, grass and inclines, stepping over dirt mounds with min to moderate assist of one hand held
04/19/2013	99199 (30min) 1:00pm to 1:30pm Continue mat exercises sit ups, bridges and push ups. Worked on balance in unilateral stance with mod to min assist. Worked on galloping, jumping forward with two hands held and marching getting knees up, hip and knee flexion with opposite hip and knee extended. Better alignment with orthotics, but new shoes do not fit well throwing her off balance.
04/24/2013	99199 (30min) 8:30am to 9:00am Continue mat exercises sit ups, bridges and push ups x 10 reps each. Worked on balance to place one foot up on step independently. Worked on stepping up and over one step verbal and tactile cues to keep UE's in no high guard position, 3/5 trials successfully. Worked on in hallways staying on right side of the hallways.

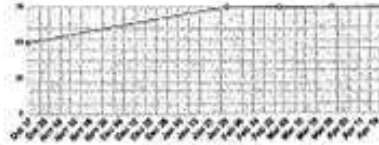
Service Codes used:

99199: Individual Treatment

Name: _____ Date of Birth _____ ID _____

Goal 09/12/2012 - 08/21/2013

1. will ascend and descend stairs using step to step pattern with one hand on the rail, at least 75% of the time, in 4/5 trials, on 2/5 school days.



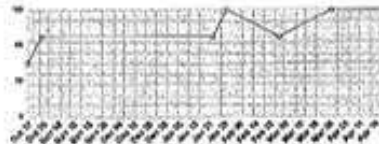
Apr 24, 2013	75	Mar 27, 2013	75	Feb 27, 2013	75
Jan 30, 2013	75	Oct 17, 2012	50		

Goal 09/12/2012 - 08/21/2013

2. will climb playground equipment independently by cruising along surfaces rather than scooting or creeping 100% of the time, in 4/5 trials on, 2/5 school days.


Goal 09/12/2012 - 08/21/2013

3. will stand independently for 3-5 minutes, at least 75% of the time, in 4/5 trials, in 5/5 school days.



Apr 24, 2013	100	Mar 27, 2013	100	Feb 27, 2013	75
Jan 30, 2013	100	Jan 23, 2013	75	Oct 24, 2012	75
Oct 17, 2012	50				

Goal 09/12/2012 - 08/21/2013

4. will demonstrate independence and safety in the hallways when traveling from one classroom to another, navigating on correct side of the hallway, around turns, etc., at least 75% of the time, in 4/5 trials, in 5/5 school days.



Apr 24, 2013	90	Mar 27, 2013	90	Feb 27, 2013	75
Jan 30, 2013	75	Jan 23, 2013	75	Oct 24, 2012	75
Sep 19, 2012	50				

Progress Monitoring using EZ MED program

Determining Need for PT Services



- Does the student qualify, according to state guidelines, using the scores obtained from the PT Assessment?
- Do the motor deficits, poor postural control and limited mobility interfere with the student's ability to participate in school activities?

Determining Need for PT Services



- Can the student's motor deficits be addressed with adaptations and accommodations in the classroom?
- Can the student's motor deficits be managed by other team members without the expertise of the PT? (Role Release PE or Adaptive PE teacher)

IEP Development



- Present Level Statements
- Goals
- Specially Designed Instruction
- Supplementary Aids and Services

Billiable PT services



Treatment

Therapeutic Exercise-ROM, stretching, strengthening

Balance and coordination activities

Gait training with or without devices

Gross motor skill practice

Non Billable services



- Instructing staff on lifting and transferring the student
- Collaboration with parents, teachers and staff regarding the student's activities, exercise programs, positioning needs, assistive devices, etc
- Adaptive Equipment (selection, instruction on use and safety, positioning of the student)

ICD-9 Codes



- Cerebral Palsy 343.9
- Spina Bifida 740
- Developmental Delays 315
- Neuromuscular Dystrophies 359
- TBI
- Genetic Disorders
- Down Syndrome 758

Medicaid Documentation



- Daily check list sent home to parent
- EZ med documentation per session
- SOAP note within the EZ med

S-subjective

O-objective

A-assessment

P-Plan

Physical Therapy Screening Form



Student:

School:

Date of Birth:

Teacher:

Date of Screening:

Reason for Screening:

Physical Therapy Screening Form



Consideration Options/Action Steps Based on Consideration Options:

- Physical Therapy (PT) adaptive/motor intervention may be needed-evaluation requested.
- AT is not used, not needed- Continue the IEP Process
- AT is not used but may be needed-Request AT assessment through PT
- AT is used and meeting current needs- Document AT in IEP
- AT is used, not meeting current needs-Request AT evaluation through PT

Physical Therapy Screening Form



Students shall develop their abilities to apply core concepts and principles from mathematics, the sciences, the arts, the humanities, social studies, practical living studies and vocational studies to what they will encounter throughout their lives:

Physical Therapy Screening Form



	Independently	With Assistance	No Awareness	Option #
Student is able to sit/or stand beside others and accept physical direction (touch) 2.29				
Presents ability to maintain safety in hallways, on stairs, and playground 2.31				
Is actively mobile to bathroom, uses sink to wash hands and transfers to the toilet comparable to peers 2.31				
Is able to sit in chair to eat with peers 2.31				
Is able to don and doff shoes, socks, orthotics 2.31				
Is able to maintain balance when standing, walking/running 2.34 and 2.35				
Is able to play on high and low playground equipment 2.34				
Is independently mobile in classroom, down hallways, in gymnasium and cafeteria 2.34				
Can sit/stand independently at desk, table, circle time to complete classroom activities 2.34				

Developed by Jennifer Clayton, Physical Therapist, Daviess County Public Schools

Physical Therapy Screening Form



- **Students shall develop their abilities to become self-sufficient individuals:**

	Independently	With Assistance	No Awareness	Option #
Student is able to participate in physical education activities with peers 2.35 and 3.2				
Is able to participate in physical activities/games in classroom with peers 2.35 and 3.2				
Student can make physical or positional adaptations for tasks and projects in classroom 3.3				



